

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**JEB 2016, INC.**

**A. Full Name (Last, First, Middle Initial)**

**MR. PAUL EDWARD THORNBRUGH**

Mailing Address 9524 E 71ST ST  
APT 218

City State Zip Code  
TULSA OK 74133-5217

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

800.00

**Transaction ID : SA17.177862**

Date of Receipt

M M / D D / Y Y Y Y  
12 22 2015

**CONTRIBUTION**

Amount of Each Receipt this Period

50.00

**B. Full Name (Last, First, Middle Initial)**

**MR. JOHN THRASHER**

Mailing Address 3391 OLYMPIC DR

City State Zip Code  
GREEN COVE SPRINGS FL 32043-8097

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
SELF-EMPLOYED

Occupation  
CONSULTANT

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17.177125**

Date of Receipt

M M / D D / Y Y Y Y  
12 18 2015

**CONTRIBUTION**

Amount of Each Receipt this Period

2700.00

**C. Full Name (Last, First, Middle Initial)**

**DAVID THRESHIE**

Mailing Address 10072 KNUTH CIR

City State Zip Code  
VILLA PARK CA 92861-4301

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
SPROUTOC PROJECT

Occupation  
NON-PROFIT

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : SA17.160762**

Date of Receipt

M M / D D / Y Y Y Y  
10 19 2015

**CONTRIBUTION**

Amount of Each Receipt this Period

1000.00

**Subtotal Of Receipts This Page (optional)**.....

3750.00

**Total This Period (last page this line number only)**.....